नबिल बैंक लिमिटेड
NABIL BANK

Applicant for Amendment to Documentory Credit

Date:

L/C NO:

Dated:

Applicant :	Beneficiary:
Advising Bank :	Ref. No : (Bank use only)

Please amend above mentioned Credit ☐ by Telex ☐ by Mail as follows

☐ Shipment date extended from to

Negotiation date extended from to

☐ Amount ☐ Increased ☐ Decreased by

to make total value of the Credit

☐

All other terms and conditions remain unchanged.

Please debit our Account No. | | | | | | : | | | | for your charges.

Signature of Applicant

Name & Signature of Guarantor

For Office use only :

Amendment ☐ Approved ☐ Rejected

Reason

Checker

Amount	Rate	Rupees	Commission

Sig. Ver.	O.S. Made	Work Card	Tickets Made	Tickets Appvd.

Amdt. Typed	Amdt. Checked	Amdt. Signed	CLR Posted	

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